NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES) CSO DISCHARGE MONITORING REPORT (DMR)

MONITORING PERIOD: MAY / 2012

NO. CSO DISCHARGES OCCURRED:

3

MONTH / YEAR

NAME: C	ITY OF MATT	OON WWTP	PERMI	RMIT NUMBER: IL0029831				
ADDRESS	S: 820 S. 5 TH	PLACE	CERTIFIED MAIL EDMR CSO					
CITY: MATTOON STATE: ILLINOIS			ZIP CODE : 61938 TELEPHONE : (217) 234-6828					
RAIN ESTIMATED ESTIMATED		CSO OU	ESTIMATED					
EVENT START DATE:	DURATION OF EVENT (IN HOURS):	AMOUNT OF RAINFALL (IN INCHES):	OUTFALL NUMBER:	OUTFALL DESCRIPTION:	DURATION OF CSO DISCHARGE (IN HOURS);			
5/2/12	24	2.41	007	6 [™] AND PIATT CSO TO RILEY	8			
5/2/12	24	2.41	800	11 th & HOWELL ASPHALT	12			
5/2/12	24	2.41	004	N. RT. 45 ICRR DITCH TO RILEY	16			
5/7/12	2	0.21	800	11 th & HOWELL ASPHALT	1			
5/7/12	2	0.21	004	N. RT. 45 ICRR DITCH TO RILEY	1			
5/21/12	2	0.45	004	N. RT. 45 ICRR DITCH TO RILEY	1			

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER		PERSONALLY EXAMPED AND AM FAMILIAR WITH THE		DATE		
	TIM GOVER	INFORMATION SUBMITTED HEREIN AND BASED ON MY INOURLY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE, AND COMPLET. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION INCLUDING THE POSSIBILTY OF FINE AND IMPRISONMENT. SEE 18 USC \$ 1001 AND 33 USC \$ 1319 (Penalties under		6	05	12
	TYPED OR PRINTED	these statutes may include fines up to \$10,000 and or maximum imprisonment of between 6 months and 5 years)	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	МО	DAY	YEAR

This Agency is authorized to require this information under Illinois Revised Statutes, 1991, Chapter 111 ½, Section 1039. Disclosure of this information is required under that Section. Failure to do so may prevent this form from being processed and could result in your application being denied. This form has been approved by the Forms Management Center.

IL 532 2471 WPC 659 Jan-96